**SEATTLE CLEMENCY PROJECT**

 **PRO BONO ATTORNEY AGREEMENT**

Name of Client:

Name of Attorney:

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of attorney), hereby acknowledge receiving a pro bono referral from the Seattle Clemency Project ("SCP") with respect to the above-listed client and I agree that I will zealously represent the client in connection with his/her clemency petition. "Representation" involves gathering information about the client as set forth in the SCP Pro Bono Manual and conferring with SCP about whether to pursue the filing of a clemency petition. If, after conferring with SCP, it is determined a clemency petition should be filed, "representation" involves drafting and filing the petition and representing the client at the clemency hearing, if a hearing is granted.

I agree that I am an attorney in good standing with the Washington State Bar and that I have no pending disciplinary actions.

I agree that I carry a minimum of $\_\_\_\_\_\_\_\_\_\_\_\_ in malpractice insurance.

I agree that I have received from SCP a document called "Responsibilities of SCP Pro Bono Attorneys" and agree to fulfill those responsibilities.

I agree that the client may discuss with SCP any concerns related to his or her legal representation and I consent to such communication.

I agree that I am handling this case on a volunteer basis and that I will not request or accept payment for the time I spend working on the case.

I acknowledge that I am assuming full responsibility for this case. I understand that SCP will not take over my case or help me find substitute representation if I am unable to fulfill my commitment to my client. I understand that, in the event I am unable to complete my commitment to my client, I am solely responsible for making arrangements to ensure that my client is adequately represented in this matter.

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_